KANSAS CRIMINAL JUSTICE COORDINATING COUNCIL

OFFICE OF THE GOVERNOR
FEDERAL & OTHER GRANTS PROGRAM
CAPITOL, 300 SW 10TH AVENUE, STE. 212S, TOPEKA, KS 66612-1590
FAX: (785) 291-3204

EQUIPMENT INVENTORY FORM DUE WITHIN 30 DAYS OF PURCHASE DATE

All subgrantees are required to fill out this form if equipment is purchased with any grant funds administered by the Governor's Grants Program. Any equipment purchase must have been approved as part of the grant award. The Governor's Grants Program defines equipment as assets with a useful life of one year or more and a cost of \$500 or more. A copy should also be retained in the subgrantee's grant file. Name of Subgrantee Organization: Grant Project Number: Name and Phone Number of Individual Completing Form: Description of Equipment: Source of the Equipment: Acquisition Date: Location of Equipment: New/Used (circle one) Equipment on Date of Purchase. If Used, Condition of Equipment: Total Purchase Cost of Equipment: Grant Project Percentage of Total Cost: Cost Charged to Grant Project: Federal Portion of Cost Charged to Grant Project: Federal Funds: Non-Federal Match: Non-Federal Match Portion of Cost Charged to **Grant Project**: **EXAMPLE:** Total Purchase Cost of Equipment: \$1,500 Cost Charged to Grant Project: \$1,000 Grant Project Percentage of Total Cost: 66% Federal Portion of Cost Charged to Grant Project: Federal Funds: \$750 75% Non-Federal Match Portion of Cost Charged to Grant Project: Non-Federal Match: \$250 25%

The subgrantee agrees that equipment purchased through this grant project will continue to be used for the purpose it was purchased for as long as needed, whether or not the grant project continues to be supported by this grant program. Further, the subgrantee assures that services provided which utilize the equipment purchased by this grant project will continue to be reported to the Governor's Federal Grants Program annually for as long as the equipment is used.

Office of the Governor Use

Entered by:

Date: